

## COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY

(Includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Phenylcyclohexanes and a liquid-crystalline medium

the specification of which (check only one item below):

☐ is attached hereto.☐ was filed as United States application

Serial No. \_\_\_\_\_

on \_\_\_\_\_

and was amended

on \_\_\_\_\_

(if applicable).

☒ was filed as PCT international application

Number \_\_\_\_\_

PCT/EP90/01330

on \_\_\_\_\_ August 13, 1990

and was amended under PCT Article 19

on \_\_\_\_\_

(if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

## PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:

COUNTRY (if PCT, indicate "PCT")	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 USC 119
Fed. Rep. of Germany	P 39 26 871.3	16.08.89	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Fed. Rep. of Germany	P 40 06 313.5	01.03.90	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Fed. Rep. of Germany	P 40 13 467.9	27.04.90	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Fed. Rep. of Germany	P 40 13 084.3	25.04.90	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Fed. Rep. of Germany	P 40 21 154.1	03.07.90	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO

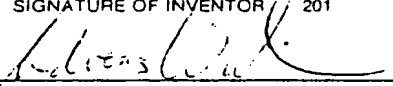
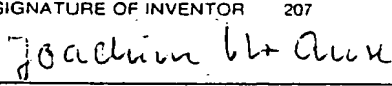

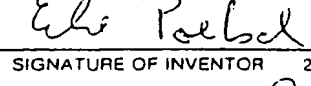
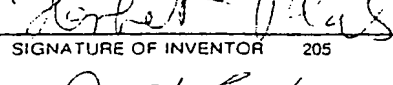
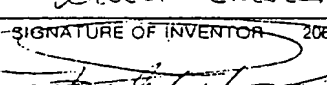
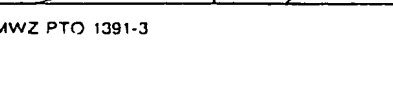
Combined Declaration For Patent Application and Power of Attorney (Continued) <small>(Includes Reference to PCT International Applications)</small>				ATTORNEY'S DOCKET NUMBER	
<p>I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application:</p>					
U.S. APPLICATION NUMBER		U.S. FILING DATE		PATENTED	PENDING
PCT APPLICATION NO.	PCT FILING DATE	U.S. SERIAL NUMBERS ASSIGNED (if any)			
<p><b>POWER OF ATTORNEY:</b> As a named inventor, I hereby appoint I. William Millen (19,544); John L. White (17,746); Anthony J. Zelano (27,969); John R. Moses (24,983); Harry B. Shubin (32,004); Brian P. Heaney (32,542); Diana Hamlet-King (33,302); Donald E. Townsend (22,069) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.</p>					
<p>Send Correspondence to: <b>MILLEN, WHITE AND ZELANO, P.C.</b> Arlington Courthouse Plaza I, Suite 1201 2200 Clarendon Boulevard Arlington, Virginia 22201</p>				Telephone No. <b>243-6333</b>	Direct Telephone Calls to:
201	FULL NAME OF INVENTOR	FAMILY NAME <b>WACHTLER</b>	FIRST GIVEN NAME <b>Andreas</b>	SECOND GIVEN NAME	
	RESIDENCE & CITIZENSHIP	CITY <b>D-6103 Griesheim</b>	STATE OR FOREIGN COUNTRY <b>Fed. Rep. of Germany</b>	COUNTRY OF CITIZENSHIP <b>Fed. Rep. of Germany</b>	
	POST OFFICE ADDRESS	STREET <b>c/o E. Merck Postfach 4119</b>	CITY <b>D-6100 Darmstadt</b>	STATE & ZIP CODE/COUNTRY <b>Fed. Rep. of Germany</b>	
202	FULL NAME OF INVENTOR	FAMILY NAME <b>HITICH</b>	FIRST GIVEN NAME <b>Reinhard</b>	SECOND GIVEN NAME	
	RESIDENCE & CITIZENSHIP	CITY <b>D-6101 Modautal 1</b>	STATE OR FOREIGN COUNTRY <b>Fed. Rep. of Germany</b>	COUNTRY OF CITIZENSHIP <b>Fed. Rep. of Germany</b>	
	POST OFFICE ADDRESS	STREET <b>c/o E. Merck Postfach 4119</b>	CITY <b>D-6100 Darmstadt</b>	STATE & ZIP CODE/COUNTRY <b>Fed. Rep. of Germany</b>	
203	FULL NAME OF INVENTOR	FAMILY NAME <b>POETSCH</b>	FIRST GIVEN NAME <b>Eike</b>	SECOND GIVEN NAME	
	RESIDENCE & CITIZENSHIP	CITY <b>D-6109 Mühltal</b>	STATE OR FOREIGN COUNTRY <b>Fed. Rep. of Germany</b>	COUNTRY OF CITIZENSHIP <b>Fed. Rep. of Germany</b>	
	POST OFFICE ADDRESS	STREET <b>c/o E. Merck Postfach 4119</b>	CITY <b>D-6100 Darmstadt</b>	STATE & ZIP CODE/COUNTRY <b>Fed. Rep. of Germany</b>	
204	FULL NAME OF INVENTOR	FAMILY NAME <b>PLACH</b>	FIRST GIVEN NAME <b>Herbert</b>	SECOND GIVEN NAME	
	RESIDENCE & CITIZENSHIP	CITY <b>D-6100 Darmstadt</b>	STATE OR FOREIGN COUNTRY <b>Fed. Rep. of Germany</b>	COUNTRY OF CITIZENSHIP <b>Fed. Rep. of Germany</b>	
	POST OFFICE ADDRESS	STREET <b>c/o E. Merck Postfach 4119</b>	CITY <b>D-6100 Darmstadt</b>	STATE & ZIP CODE/COUNTRY <b>Fed. Rep. of Germany</b>	
205	FULL NAME OF INVENTOR	FAMILY NAME <b>COATES</b>	FIRST GIVEN NAME <b>David</b>	SECOND GIVEN NAME	
	RESIDENCE & CITIZENSHIP	CITY <b>Merley, Wimborne</b>	STATE OR FOREIGN COUNTRY <b>Great Britain</b>	COUNTRY OF CITIZENSHIP <b>Great Britain</b>	
	POST OFFICE ADDRESS	STREET <b>c/o E. Merck Postfach 4119</b>	CITY <b>D-6100 Darmstadt</b>	STATE & ZIP CODE/COUNTRY <b>Fed. Rep. of Germany</b>	
206	FULL NAME OF INVENTOR	FAMILY NAME <b>RIEGER</b>	FIRST GIVEN NAME <b>Bernhard</b>	SECOND GIVEN NAME	
	RESIDENCE & CITIZENSHIP	CITY <b>D-6115 Münster-Altheim</b>	STATE OR FOREIGN COUNTRY <b>Fed. Rep. of Germany</b>	COUNTRY OF CITIZENSHIP <b>Fed. Rep. of Germany</b>	
	POST OFFICE ADDRESS	STREET <b>c/o E. Merck Postfach 4119</b>	CITY <b>D-6100 Darmstadt</b>	STATE & ZIP CODE/COUNTRY <b>Fed. Rep. of Germany</b>	

<b>Combined Declaration For Patent Application and Power of Attorney (Continued)</b> <small>(Includes Reference to PCT International Applications)</small>	<b>ATTORNEY'S DOCKET NUMBER</b>
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207	FULL NAME OF INVENTOR	FAMILY NAME KRAUSE	FIRST GIVEN NAME Joachim	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY D-6110 Dieburg	STATE OR FOREIGN COUNTRY Fed. Rep. of Germany	COUNTRY OF CITIZENSHIP Fed. Rep. of Germany
	POST OFFICE ADDRESS	STREET c/o E. Merck Postfach 4119	CITY D-6100 Darmstadt	STATE & ZIP CODE/COUNTRY Fed. Rep. of Germany
208	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY
209	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP

210	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY
211	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY
212	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201 	DATE Sept. 25, 1990	SIGNATURE OF INVENTOR 207 	DATE Sept. 25, 1990
SIGNATURE OF INVENTOR 202 	DATE Sept. 25, 1990	SIGNATURE OF INVENTOR 208	DATE
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SIGNATURE OF INVENTOR 205 	DATE Sept. 25, 1990	SIGNATURE OF INVENTOR 211	DATE
SIGNATURE OF INVENTOR 206 	DATE Sept. 25, 1990	SIGNATURE OF INVENTOR 212	DATE